

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

**Barbour County Historical Prservation
Authority**
c/o Walter Calton
P.O. Box 696
Eufaula, Alabama 36027

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* 2/10/06
☒ Agent
☐ Addressee
- B. Received by (Printed Name) *[Signature]* C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☒ Yes

2. Article Number

(Transfer from service label)

06 cv 123
 7000 0600 0027 9310 8294

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540

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- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
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1. Article Addressed to:

Mr. Jack J. Rusch
104 East Broad Street
Eufaula, Alabama 36027

COMPLETE THIS SECTION ON DELIVERY

- A. Signature *[Signature]* ☐ Agent
☒ Addressee
- B. Received by (Printed Name) C. Date of Delivery
- D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☐ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☒ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☒ Yes

2. Article Number

(Transfer from service label)

06 cv 123
 7000 0600 0027 9310 8300

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Domestic Return Receipt

102595-02-M-1540